

## Meadows, Richard F. (Rick)



Mr. Richard (Rick) Meadows is retired from the military having served over twenty years at first in the Air Force as a jet engine mechanic. He began his RN career after completing a BS in nursing, where he returned to active duty in the Army Nurse Corps serving at army bases in the United States and Germany. Mr. Meadows was educated as an Adult Gerontology Nurse Practitioner. He has been involved in the education of NPs since 1978 in a multitude of programs, including military programs, certificate, and master's degree education. Mr. Meadows has held the roles of NP educator, clinician, mentor, and advocate on the local and national levels.

### Interview Abstract

During the interview Mr. Meadows recalls working at the grass roots level both locally and nationally on NP policy issues and starting the Southern Colorado Advanced Practice Nurses Group. During this same time, he also discussed serving on the AANP board, and as chair of the AANP Certification Commission. He remembered participating in forums involving both title protection and prescriptive authority, and in clinical work. Mr. Meadows notes on a personal level, he believed it was always important to stay involved and abreast of the issues. He said he realized the importance of keeping in touch with people who could make a difference together. Mr. Meadows believes it was his involvement with the professional organization and the certification board and the ability to have the help of input of others to reach consensus on issues. He thinks the most pivotal time for nursing has been the overall implementation and response to the IOM Report in terms of supporting nursing to enable full practice authority. Mr. Meadows also noted that the Consensus Model has come a long way to shape the advanced practice role in nursing. He stated if he could change anything it would be the number of specialties in advanced practice nursing. Mr. Meadows thinks nursing did it the wrong way to have all the specialty tracks such as Women's Health NPs, Psych NPs etc. He believes there would be no reason for different "entry level" specialty areas if NPs started with one basic preparation and then the NP could specialize.

The interview concludes with his advice to remain active professionally and personally but be careful not to become overly involved. Mr. Meadow's notes 'too much is not good'. His personal thought is to 'keep the patient first'.

### Biographical Sketch

Rick Meadows was formerly the Executive Director of the American Academy of Nurse Practitioners Certification Board. He has been involved in the education of NPs since 1978 in a multitude of programs, including military programs, certificate, and master's degree education. He has worked at the grass roots level both locally and nationally, starting the

Southern Colorado Advanced Practice Nurses Group, serving on the AANP board, and serving as chair of the AANP Certification Commission. He has participated in forums involving both title protection and prescriptive authority, and in his clinical work, served as a true mentor to NPs on advancing our legislative agendas.

**Key Words**

Nurse Practitioners, NP education, advocate, policy, networking

**Interview Transcript**

**Richard F Meadows**

**AANP Oral History Project**

**Interview with Richard F (Rick) Meadows, MS, ANP-C, FAANP (2002)**

**by Lenore (Leni) Resick, PhD, CRNP, FNP-BC, FAANP, FAAN**

**History Committee FAANP**

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Rick Meadows is currently the Executive Director of the American Academy of Nurse Practitioners Certification Board. He has been involved in the education of NPs since 1978 in a multitude of programs, including military programs, certificate, and master's degree education. He has worked at the grass roots level both locally and nationally, starting the Southern Colorado Advanced Practice Nurses Group, serving on the AANP board, and serving as chair of the AANP Certification Commission. He has participated in forums involving both title protection and prescriptive authority, and in his clinical work, served as a true mentor to NPs on advancing our legislative agendas.

*Why did you apply to become a Fellow?*

This is an interesting one. Actually, I received a call from Zo De Marchi asking if I wanted to be a Fellow. Back then, Fellows nominated potential Fellows. Since I was on the AANP Board and the Chair of the Certification Commission Board, Mary Ellen Roberts actually sponsored me. My application went through the process in place at the time and I was selected. I was inducted in Reno, Nevada at the National AANP Conference in 2002.

*How did you feel when you were notified that you were selected as a Fellow?*

I felt honored. I tend to stay away from things that make me stand out. It is something that stayed with me from my time in the Army related to "keep your head down". I am retired military. I've served over twenty years at first in the Air Force as a jet engine mechanic and then after I completed a BS in nursing I went back to active duty in the Army Nurse Corps serving at army bases in the United States and Germany.

*What were your hopes for the Fellowship?*

Since the first group was in 2000, back then we were in the planning stages. We were focused on the early stages of organizational development.

*How did being in the Fellowship help you think more globally about being a Nurse Practitioner?*

On a personal level, it is important to me to stay involved and abreast of the issues. I realized the importance of keeping in touch with people who could make a difference. This is a hard one for me to answer since I was working more than full time. But, now that I think of it, it was the “we” not so much the “I” that was most important to me. It was being in touch with people around me who could make the difference together. It was the involvement with the professional organization and the certification board and the ability to have the help of input of the other Fellows to reach consensus on issues.

*What advice do you have for the present Fellows?*

My advice to the present Fellows is to remain active professionally and personally but be careful not to become overly involved. Too much is not good. My personal thought is to “keep the patient first”.

*What motivates you to maintain your Fellowship?*

At 72 years of age I still have no plans to retire. I plan to continue my professional involvement and “keep going” at the state, national, and international level.

### **Revised current questions:**

*You’ve been a Fellow since 2002, what changes have you seen in the Fellowship since then?*

Continued growth is the number one change. Growth is a natural occurrence for the organization due to the number of individuals we have as fellows and growth is a function of how the nomination process works. There was a time we could all sit in one room and know each other. It’s hard now to know even half of the people in the room. This has made it more impersonal than in the past. The association within the Fellowship has changed with an increase in numbers and in structure and politics. This is all a normal part of maturing and growth, however.

*What do you see are the pivotal moments in the past years? In health care? In nursing? In Advanced practice?*

The pivotal moments in recent years in health care has been the disembowelment of the Affordable Care Act. This will inevitably affect millions of individuals needing access to affordable health care and diminish our ability to provide it.

In nursing it has been the overall implementation and response to the IOM Report in terms of supporting nursing to enable full practice authority. That is support of nursing/Advance Practice to be able to practice to the full of extent of their education and experience.

Also the Consensus Model has come a long way to shape the advanced practice role in nursing.

*How have you had a positive impact on the nurse practitioner movement?*

I have had a positive impact on the nurse practitioner movement by my personal involvement in AANP since 1993. I served as the Colorado State Rep and as the Region 8 Director on the AANP Board. I have been active on the national and international levels. Another impact has been the role I have played in the growing numbers of nurse practitioners who are nationally certified by AANPCB.

*What would you change if you had it to do over again?*

I would change the number of specialties in advanced practice nursing. That is, not have as many specialty areas for advanced practice. For example, the Physician's Assistant model of education has one basic preparation and if a PA wants to, he/she can specialize. In my opinion, Nursing did it the wrong way to have all the specialty tracks such as Women's Health NPs, Psych NPs etc. There would be no reason for different "entry level" specialty areas if we started with one basic preparation and then an NP could specialize.

*If you could go back to 2002, what advice would you give yourself as you considered applying for Fellowship?*

I can't think of anything as advice I would give myself. Applying was different in 2002. We did it as well as could be back then. For today, I would advise new applicants to be sure the sponsor they pick knows who they are, helps them with the application, and helps them with writing.

*What legacy do you want to leave for FAANP?*

The legacy I want to leave is involvement and staying abreast of what is going on in the profession and taking all opportunities that involve influencing the profession in a positive direction.

*What advice would you give to new nurse practitioners?*

Study hard, get certified, and don't let your certification lapse. Remember that "nurse" is important but "practitioner" is most significant.

*What do you see as the role of Nurse Practitioners in health care in the next 25 years? 50 years? 100 years?*

In the next 25 years the vast majority of primary care will most likely be delivered by nurse practitioners with an increase in cross over with all types of nurse practitioner and CNS specialists. I have no clue about the next 50 or 100 years.

*I was wondering what it like was for you being a male nurse practitioner in a predominately female profession.*

I have accepted the fact that nursing is a predominately female profession. I can deal with that. Being a nurse in the military was different since 1/3 of the nurses in the army at the time were men. I never had an issue when the NP was referred to as “she”. However, in the 1970’s I received a coupon for a free pair of white panty hose addressed to Richard F. Meadows, RN and was a bit taken aback. I later heard that a football player, I think it was Joe Namath, wore women’s panty hose to keep his legs warm. Not sure of how valid that story was, however.

Just a final thought, at the winter meeting in New Orleans, I was talking with Jan (Towers) and others when a thought ran through my mind. That was, of all the choices I have made in my life, being a nurse practitioner was a very good one.